

## HAZARDOUS WASTE MANAGEMENT BRANCH

## UNIFORM HAZARDOUS WASTE MANIFEST

714 744 P Street  
Sacramento, CA 95814*WIK NELSON*

Please print or type with ELITE type (12 characters per inch)

STATE ID NUMBER 83410698

## GENERATOR NAME AND MAILING ADDRESS

*Canon Business Machines**3191 Red Hill  
Costa Mesa, CA 92626*

## MANIFEST DOCUMENT NUMBER

## EPA ID NUMBER

*CAD078140058*

## TRANSPORTER NO. 1

*Omega Chemical Corp  
12504 E. Whittier Pl.  
Whittier, CA 90602*

## VEH/CONTAINER NO

## EPA ID NUMBER

*00042507 CAD042245001*

## TRANSPORTER NO. 2/ALTERNATE TSD FACILITY

## VEH/CONTAINER NO

## EPA ID NUMBER

## TREATMENT, STORAGE, OR DISPOSAL (TSD) FACILITY

*Omega Chemical Corp.*

## AREA CODE/PHONE NUMBER

*(213) 698-0991*

## EPA ID NUMBER

*CAD042245001*

## PROPER U.S. DOT SHIPPING NAME AND HAZARD CLASS

UN/NA  
NUMBERTOTAL  
QUANTITYUNIT  
WT/VOLCONTAINER  
NO. TYPEWASTE  
CAT NO*Waste Methylene Chloride  
Corrosive Liquid**UN 1593**250**G**DM**21101*

## COMPONENTS

## CONC RANGE

## UPPER

## LOWER

## UNITS

## %

## PPM

*Methylene Chloride  
Formic acid**90**95**%**15**10**%*

## SPECIAL HANDLING INSTRUCTIONS

*Plu after 2/2/84 spill to follow*

This is to certify that the above-named wastes are properly classified, described, packaged, marked and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

*ERIK NELSON*

MO.	DAY	YR
<i>02</i>	<i>29</i>	<i>84</i>

☐ Check if continuation sheet is used Number of continuation sheets

## TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

*Steve Simpson*DATE  
REC'D  
&  
ACCEPTED

MO.	DAY	YR
<i>12</i>	<i>29</i>	<i>84</i>

## TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE  
REC'D  
&  
ACCEPTED

MO.	DAY	YR

## DISCREPANCY INDICATION SPACE

*ph < 2.0*

Facility owner or operator Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above Note: TSDF must complete waste number. See instructions.

Printed or typed full name and signature

*STEVE SIMPSON Steve Simpson*

## EPA ID NUMBER

*CAD042245001*

## DATE RECEIVED &amp; ACCEPTED

MO.	DAY	YR
<i>03</i>	<i>02</i>	<i>84</i>